

papers from this single institution, at least it would allow the interested reader to explore further without too much difficulty.

This is an authoritative and even classic text quite unlike any other currently available, almost deliberately ignoring the approach of other centres. It is rather comforting to see that there is still a place for such an iconoclastic approach these days and I have no doubt that the new addition will sell well. As a reviewer of the first edition pointed out, "it should be in the library of every Radiotherapy Department, and in the hands of every trainee" and I look forward in due course to seeing the third edition.

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Eur J Cancer, Vol. 28A, No. 8/9, p. 1583, 1992.
Printed in Great Britain
0964-1947/92 \$5.00 + 0.00
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Interventional Radiation Therapy

Edited by R. Sauer.

Berlin, Springer, 1991. 398 pp. ISBN 0 387 52465 7.
DM 320.00.

THE IDEA of this compilation of papers from various authors on a large variety of techniques and results of interstitial and intracavitary brachytherapy was originally intended to summarise the presentations made at a meeting held in Rothenburg in 1987 to promote brachytherapy in Germany. The final book published in 1991 obviously deserves wider objectives and should stimulate the interest of radiation physicists, radiation biologists and radiotherapists involved in brachytherapy.

The basic principles of clinical radiobiological and radiation physics of brachytherapy are first addressed by major experts in a clear and concise sequence of papers with reference to updated concepts, e.g. low dose rate (LDR) and high dose rate (HDR) brachytherapy. Then, the major tumour locations benefiting from brachytherapy techniques are individualised in sections containing an average of five presentations each to cover the field with a variety of technical aspects and clinical experiences. Not only are the most common sites exposed (cervix, head and neck, breast, gynaecology), but rarer and/or tumour sites benefiting more recently from brachytherapy have been revisited and subjected to equal interest as the more classical applications: as a matter of fact, there are few examples of books offering such an extensive coverage of brachytherapy techniques on choroidal melanoma, anal canal cancer, prostatic cancer and interstitial hyperthermia. HDR brachytherapy on bronchus and oesophageal carcinoma is not covered. The usual risk of heterogeneity for scientific quality and editorial presentation has been remarkably avoided.

There is no weak chapter in this book and some "old fashioned" techniques are only presented as landmarks to compare most recent approaches. This is in the reviewer's opinion

the only point which can be criticised when, for instance, HDR gynaecological brachytherapy performed with good applicators and modern dosimetry is compared with LDR results from historical periods without the same technology and computer facilities. However, an effort was made in most papers to use modern units for defining the source activities and for reporting treatment planning.

Although most of these papers are representative of the major technical progressions in brachytherapy, they also bring some evidence of the difficulties met in establishing useful comparisons between treatment methods and results. As a matter of fact, the reference to ICRU report 38 for gynaecological applications is seldom made. A similar report is not yet available for brachytherapy interstitial applications. In addition, the need for international agreements on how to report complications appears to be a first priority.

Apart from these comments which hopefully should stimulate authors to improve their future manuscripts, it is quite clear that this book represents a very useful investment for the brachytherapy practitioner in a field in which updated textbooks are rare, while technical aspects and indications of brachytherapy are experiencing a rapid and successful revival.

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News

A Decade of Cancer Education and Training in Europe

Europe is beginning to get the feel of its "rendez-vous" with all the changes of the new era heralded by the historic date of 1992. Apart from the wider spectrum of events taking place in all the countries of the Community, the European School of Oncology (ESO) will be marking the end of a first decade of activity and, should the present trend continue, it will largely surpass the overall figure of 10 000 alumni throughout the world.

The map of the European effort against cancer is becoming ever clearer and more promising: the European Organization for Research and Treatment of Cancer in Brussels, the New Drug Development Office in Amsterdam of the same organisation, the European Molecular Biology Laboratories in Heidelberg, the Chairmanship of the EC Committee of Cancer Experts in Paris, the European Journal of Cancer in London and the ESO in Milan are all part of an increasingly efficient and interacting structure which is strengthening Europe in the field of oncology.

The ambition of the School is to contribute to a reduction in that segment of cancer mortality which can be imputed to late diagnosis and/or inadequate treatment. Unfortunately, this segment can represent a percentage of as much as 20% in some countries, and an improvement in the oncological skills of health professionals is becoming a crucial factor in any successful plan for the control of cancer.